No. <b>W 71578</b>		Due no later than Feb 29, 2012		2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form			LANCE J SCHUSTER			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080	URGENT CARE . WILLIAM R ED 740 S WOODRI	1. Mailing Address: Correct in this box if needed.  URGENT CARE ASSOCIATES, PLLC  WILLIAM R EDER  740 S WOODRUFF AVE  IDAHO FALLS ID 83401  3. New Registered Agent						
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Limited Liability Companies: En	r Names and Addresses	s of at least one Member or Manager.						
Office Held Name		Street or PO Address	City	State	Country	Postal Code		
MANAGER BILL E	ER	740 S WOODRUFF	IDAHO FALLS	ID	USA	83401		
5. Organized Under the Laws of:	6. Annual Report	must be signed.*						
ID	Signature: Kim	Signature: Kim Koontz		Date: 02/13/2012				
W 71578	Name (type or	Name (type or print): Kim Koontz		Title: Fiscal Officer				
Processed 02/13/2012	* Electronically provided signatures are accepted as original signatures.							